

AUG 02 2005

P A T E N T

UNITED STATES PATENT AND TRADEMARK OFFICEDECLARATION OF PAUL JOHNSON WANG, M.D., UNDER 37 C.F.R. § 1.132

Dear Sir:

I, Paul Johnson Wang, M.D., F.A.C.C., declare that:

1. I am a U.S. citizen and a resident of Saratoga, California.
2. I have a degree in medicine, and specialize in the area of cardiovascular medicine.
3. I have practiced cardiovascular medicine for over sixteen years.
4. I am currently the Acting professor in Cardiovascular Medicine at Stanford University Medical Center in Stanford, California. I have held this position since 2003. I am also a Director of the Cardiac Arrhythmia Service and Cardiac Electrophysiology Laboratory at Stanford University Medical Center in Stanford, California. I have held this position since 2003.
5. My teaching, research and patient-related activities involve several areas of cardiovascular medicine, and specifically include the development and use of cardioverter defibrillator technologies for treating patients.
6. I have held academic appointments at Harvard Medical School (Clinical and Research Fellow, Department of Medicine), Tufts University School of Medicine (Co-Director, BS/MS/MD Program, Tufts University College of Engineering and School of Medicine) and Stanford University School of Medicine (Professor of Medicine). I have additionally held hospital appointments at New England Medical Center Hospital and Stanford University Medical Center. Currently, I hold six United States Patents (U.S. Patent No. 5,147,355, U.S. Patent No. 5,462,545, U.S. Patent No. 5,766,152, U.S. Patent No. 5,947,952, U.S. Patent No. 6,319,250, and U.S. Patent No. 6,475,179). Among my various research interests, I have performed research on the examination of initiating events in ventricular arrhythmias using data from stored implantable cardioverter defibrillator intracardiac electrograms. In collaboration with Roger Mark, MD, PhD at MIT, I am working to create the first web-based electrogram database using devices from multiple manufacturers. This work is being conducted as part of the NHLBI/NIH study Triggers of Ventricular Arrhythmias (TOVA) Core Laboratory for Electrogram Analysis, which I direct. As part of this study, we are examining triggering events with the mechanism of the arrhythmia

onset. We have adapted this database to analyze the percent pacing in the multicenter clinical study MADIT II, directed by Arthur Moss, MD.

7. In the context of cardioversion defibrillation treatment of a patient, an electrode, lead, or lead system that resides at least in part within a patient's vasculature or at least in part within a patient's heart is identified as a transvenous electrode, lead, or lead system.

8. Furthermore, I would not identify an electrode, lead, or lead system residing at least in part within a patient's vasculature or at least in part within a patient's heart as a "subcutaneous" electrode, lead, or lead system.

9. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful, false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Date: 7/13/05



Paul Johnson Wang, M.D., F.A.C.C.